

OCCUPATIONAL THERAPY SERVICES

PROCEDURE CODES

Individual **97530-U1** Group **97150** Eval. **97003**

DEFINITION

Services to address the functional needs of the child regarding his/her adaptive development, adaptive behavior and play, sensory, motor, and postural development. They are designed to improve the child's ability to perform tasks at home, school, and community settings.

Services include:

- Identification,
- Assessment,
- Intervention,
- Adaptation of the child's environment, and
- Development of assistive and orthotic devices to help facilitate the child's development and promote acquisition of functional skills and to help prevent or minimize the impact of initial or future delay in development or loss of functional ability.

QUALIFIED PROVIDER

An individual licensed as an Occupational Therapist or certified as an Occupational Therapy Assistant, by the Arkansas Medical Board.

UNIT OF SERVICE

Occupational Therapist

- Individual – A unit of service is 15 minutes
- Group – A unit of service is 15 minutes with a maximum of 4 persons per group
- Evaluation – A unit of service is 30 minutes. Annual assessment may be completed as part of a service session.

Therapy exceeding standards will be approved by Prior Authorization Committee. Justification required.

RATE OF REIMBURSEMENT

Rates based on Medicaid therapy rates as of January 1, 2008

- Z1929 Individual - (guideline: 4 units per day and 12 units per week)
- Z0470 Group - (guideline: 4 units per day and 12 units per week)
- Z1936 Evaluation - (guideline: 4 units per year)

Therapy exceeding standards will be approved by the Prior Authorization Committee. Justification required.

REQUIRED DOCUMENTATION OF SERVICE PROVIDED

The provider of the service must maintain on site, narrative documentation of:

- The service provided (amount, date, and times)
- Activities conducted
- Outcomes worked on (objectives)
- Progress made
- Recommendations (if appropriate)

(03/01/02)